1294044

### FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

### FORM D

# NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

OMB APP	ROVAL
OMB Number:	3235-0076
Expires:	May 31, 2005
Estimated avera	age burden
hours parrospo	nca 1600

SEC U	SE ONLY
Prefix	Serial
DATE P	ECEIVED
1	1

	SECTION 4(0), AND/OR	1
UNIF	ORM LIMITED OFFERING EXEM	PTION
Name of Offering ( check if this is an amen Hartung Family, LLC Offering	dment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply):  Type of Filing:  New Filing  Amendm	Rule 504 Rule 505 Rule 506 Section 4(6)	ULOE RECEIVED CONTROL
	A. BASIC IDENTIFICATION DATA	0100 1 5 2000
1. Enter the information requested about the is	suer	A 100 1
Name of Issuer ( check if this is an amendm	ent and name has changed, and indicate change.)	181
Hartung Family, LLC		
Address of Executive Offices 700 West Tuscarawas Street, Canton	(Number and Street, City, State, Zip Code) n, Ohio 44702	Telephone Number (Including Area Code) 330-452-0031
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business To own, acquired The Belden Brick Company, a Debest interest of the company.	ire, manage, buy, sell, exchange, vote Laware corporation, as the Managers may	and otherwise deal with shares of stocy from time to time deem to be in the
Type of Business Organization		
_ ·	ited nartnership, to be formed	blease specify): Liability Company PROCESSED
, ,	Month Year anization: O 4	nated         1 7 2004
GENERAL INSTRUCTIONS		FINANCIAL
Federal: Who Must File: All issuers making an offering of s 77d(6).	ecurities in reliance on an exemption under Regulation D o	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later that	in 15 days after the first sale of securities in the offering.	A notice is deemed filed with the U.S. Securities

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issue.
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter E Beneficial Owner Executive Officer Director General and/or  Managing Exercise Manage
Paul W. Hartung, Jr.
Full Name (Last name first, if individual)
7707 Lake O'Springs Road, North Canton, Ohio 44720
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Director General and/or Managing PXANA Manage
David L. Hartung
Full Name (Last name first, if individual)
6344 Doral Drive N.W., Canton, Ohio 44718
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter  Beneficial Owner  Executive Officer Director General and/or
Nancy Jane Hartung Managing Partner
Full Name (Last name first, if individual)
7707 Lake O'Springs Road, North Canton, Ohio 44720
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Director General and/or
Barbara Hartung Smtih Managing Partner
Full Name (Last name first, if individual)
331 Pinecrest Avenue, Bristol, VA 24201
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Director General and/or  Managing Partner
Thomas T. Hartung
Full Name (Last name first, if individual)
25261 Spindlewood, Laguna Niguel, CA 92677
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)
(one orange meet or each and one engineering colored or any successfully

				* B1	NFORMAT	ION ABO	IT OFFER	NG:				
1. Has th	e iccuer col	d or does t	ha icenar i	ntend to se	ell to non-	accredited	investors i	n this offer	ina?		Yes	No
1. 1145 til	c issuel sur	a, or does t			n Appendix						K)	
2. What	is the minin	num investr									\$5,0	00
											Yes	No
		permit join										X
commi If a per or state	ission or sim rson to be li es, list the n	ilar remune sted is an as	ration for s sociated po proker or d	solicitatior erson or ag ealer. If m	of purchas ent of a bro ore than fiv	ers in conn ker or deale e (5) perso	ection with er registere ns to be lis	n sales of se d with the ! ted are asso	curities in t SEC and/or	lirectly, any the offering. with a state sons of such	:	
Full Name	(Last name	first, if ind	ividual)									
Business or	Residence	Address (N	lumber an	d Street, C	ity, State, 2	Zip Code)	<del></del>					
Name of A	ssociated B	roker or De	aler									
States in W	hich Person	n Listed Ha	s Solicited	or Intend	s to Solicit	Purchasers	;					***************************************
(Check	"All State	s" or check	individua	l States)	••••••		••••••		••••••		☐ Al	l States
IL MT RI	AK IN NE SC	IA NV SD	AR KS NII TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OII WV	GA MN OK WI	MS OR WY	ID MO PA PR
Full Name	(Last name	first, if ind	ividual)		***************************************						-	
Business o	r Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)					·	
Name of As	sociated Br	roker or De	aler									
States in W	hich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
(Check	"All State:	s" or check	individual	States)	•						☐ All	l States
AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NI TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Full Name	Last name	first, if indi	vidual)			***************************************						
Business o	r Residence	Address (N	Number an	d Street, C	ity, State,	Zip Code)						<del>*************************************</del>
Name of As	sociated Br	oker or Dea	aler		· · · · · · · · · · · · · · · · · · ·							
States in W	hich Person	Listed Has	Solicited	or Intends	to Solicit	Purchasers					· · · · · · · · · · · · · · · · · · ·	
(Check	"All States	or check	individual	States)		•••••	*******	••••••••••••		••••••	☐ All	States
AL IL MT RI	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR

## C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Pric	p.	Am	nount Already Sold
		•			
	Debt				
	Equity	\$ <u>5,596,200</u>		\$5,5	596,200
	☑ Common ☐ Preferred				
	Convertible Securities (including warrants)				
	Partnership Interests	\$		\$	<del></del>
	Other (Specify)	\$		\$	
	Total	\$		\$	
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	.*			Aggregate
		Number Investors			ollar Amount of Purchases
	Accredited Investors	4	_	\$ <u>2</u> ,	,372,800
	Non-accredited Investors	19		\$ <u>3</u> ,	,223,400
	Total (for filings under Rule 504 only)			\$_	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
		Type of		D	ollar Amount
	Type of Offering	Security			Sold
	Rule 505				
	Regulation A		_	\$_	
	Rule 504		_	\$_	
	Total		_	\$	
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs		П	\$	0
	Legal Fees		П	\$	0
	Accounting Fees		П	\$	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$	0
	Total		_   	\$	0

	C. OFFERING PRICE, NUM	BER OF INVESTORS, EXPENSES AND USE OF	PROC	EEDS	114
-	b. Enter the difference between the aggregate offer and total expenses furnished in response to Part C—proceeds to the issuer."		s <b>s</b>		\$5,596,200
5.	Indicate below the amount of the adjusted gross pre each of the purposes shown. If the amount for ar check the box to the left of the estimate. The total o proceeds to the issuer set forth in response to Part	ly purpose is not known, furnish an estimate ar f the payments listed must equal the adjusted gro	ıd		
			Di	yments to Officers, rectors, & ffiliates	Payments to Others
	Salaries and fees		🔲 \$_	0	
	Purchase of real estate		. 🔲 \$_	0	. [] \$ <u>-0</u>
	Purchase, rental or leasing and installation of macand equipment	hinery	[ ] \$_	0	
	Construction or leasing of plant buildings and fac				s
	Acquisition of other businesses (including the val offering that may be used in exchange for the asset issuer pursuant to a merger)	ets or securities of another	.┌┐\$_	0	□\$ <u> </u>
	Repayment of indebtedness				s
	Working capital		_		
	Other (specify): There are no cash procee				
	the columns to the right is equal to t	he value of the securities which			
	will be received as consideration for	the units issued.	. 🗆 \$_	0	<u>\$5,596,200</u>
	Column Totals		. 🗆 \$_	0	<u>\$5,596,200</u>
	Total Payments Listed (column totals added)		•	\$ <u>5</u> ,	596,200
		D FEDERAL SIGNATURE			
sign	issuer has duly caused this notice to be signed by the ature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acc	nish to the U.S. Securities and Exchange Comm	ission,	upon writte	
Issi	er (Print or Type)	Signature	Date	2 4	[
Ha	rtung Family, LEC	Third of States	6	-1-	04
	ne of Signer (Print or Type)	Title of Signer (Print or Type)	<u>.                                    </u>	····	

- ATTENTION -

Managing Member

David L. Hartung

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		L. STATE SIGNATURE	
1.		esently subject to any of the disqualification Yes N	
	See	Appendix, Column 5, for state response.	
2.	The undersigned issuer hereby undertakes to D (17 CFR 239.500) at such times as require	urnish to any state administrator of any state in which this notice is filed a notice od by state law.	on Form
3.	The undersigned issuer hereby undertakes to issuer to offerees.	furnish to the state administrators, upon written request, information furnished	1 by the
4.	limited Offering Exemption (ULOE) of the s	suer is familiar with the conditions that must be satisfied to be entitled to the Uate in which this notice is filed and understands that the issuer claiming the avaiing that these conditions have been satisfied.	
	uer has read this notification and knows the cont thorized person.	ents to be true and has duly caused this notice to be signed on its behalf by the unde	rsigned
ssuer (	Print or Type)	Signature Date 6-2-04	
Hartu	ng Family, LLC	Court & Harting 10-2-01	
Vame (	Print or Type)	Title (Print or Type)	
David	d I Hartung	Managing Member	

#### Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				AP	PENDIX		To the Paris San		32 33 4
111	Intend to non-a investor	1 to sell accredited as in State 3-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4 f investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									_
AK		·							
AZ									
AR			·						
CA	X		Equity \$740,000			4	\$740,000 3,700 units		х
со	Х		Equity \$719,000			3	\$719,000 3,595 units		х
СТ									
DE									
DC									
FL									
GA					-				
HI									
ID			Equity				\$198,400		
IL	Х	<del></del>	\$198,400		<u> </u>	1	992 units		х
IN									
IA									
KS									
KY									
LA									
ME MD					-				
MA									
MI									
MN									
MS									
1412									

1	12				APP	ENDIX :	4	79.875-1.352	15.	
State         Yes         No         Accredited Investors         Amount         Non-Accredited Investors         Amount         Yes         No           MO         Image: Control or	1	Intend to non-a investor	i to sell accredited as in State	Type of security and aggregate offering price offered in state		amount pu	f investor and rchased in State		Disqua under St (if yes, explan waiver	lification ate ULOE attach ation of granted)
MT	State	Yes	No		Accredited	Amount	Non-Accredited	Amount	Yes	No
NE	МО									
NY	МТ									
NH	NE									
NJ	NV									
NM	NH							,		
NY	ŊJ									
NC   ND   Equity   S2,372,800   S831,000   X   S33,203,800   4   S1,364 units   7   4,155 units   X   X   X   X   X   X   X   X   X	NM									
ND	NY									
OH X	NC									
OK         OR	ND									
OR       PA         PA       Image: Control of the part of the	ОН	Х		Equity \$3,203,800	4	\$2,372,800 11,864 uni	ts 7	\$831,000 4,155 units		Х
PA	ОК									
PA	OR									
SC         SD           TN         STX           UT         ST35,000           VA         X           Equity 5735,000         4           3,675 bunits         X           WA         WV	PA									
SC   SD   SD   SD   SD   SD   SD   SD	RI									
TX	SC									
TX	SD									
UT	TN									
VT	TX	-								
VA X Equity \$735,000 4 3,675 punits X WA WV	UT									
WA WV	VT						·			
WA WV	VA	X_		Equity \$735,000	`		4	\$735,000 3,6755units		х
	WA									
WI	wv									
	wı									

	1			АРР	ENDIX				174.	
1	to non-a	2 If to sell accredited as in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Number of Number of Accredited Non-Accredited				No	
WY										
PR										